

Resident Assessment Instrument (RAI) and Minimum Data Set (MDS) Automation

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To: Nursing Homes
Hospices

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From: Jan Eakins, Chief, Provider Regulation & Quality Improvement Section

cc: Susan Schroeder, Director, Bureau of Quality Assurance

This memo addresses the current status of Minimum Data Set (MDS) automation and the Resident Assessment Instrument (RAI). If you have any further questions regarding these issues, please contact Billie March, RAI Coordinator, at (608) 266-7188, or Chris Benesh, MDS/OASIS Automation Coordinator, at (608) 266-1718.

MDCN Connectivity for MDS Data Questionnaire

This is a reminder to all nursing homes that have not yet converted to the Medicare Data Communication Network (MDCN). HCFA is requiring all nursing homes to migrate to the Medicare Data Communications Network (MDCN) as the communication link to their state agency. This new system creates a separate network for telecommunications access to state MDS systems and a second layer of user authentication for added security.

The MDCN is operated by AT&T Global Network Services (AGNS--also referred to as the MDCN Operator) for HCFA. Dial-up access will be via a local call for most nursing homes. **This is a change to the dial-up connection only** for submissions of MDS data and retrieval of reports. MDS data submissions will require the use of the same application software, browser, and state assigned transmission Facility ID and password currently being used.

Nursing homes that have not already completed a MDCN questionnaire and returned the questionnaire to the MDCN Operator must do so as soon as possible. Contact the MDCN Help Line at 1-800-905-2069 if you need a copy of the MDCN questionnaire. After completion of the questionnaire, nursing homes will receive an MDCN User ID and dialer software for connecting to the MDCN.

Nursing homes that have not yet converted should do so as soon as possible as the current access to the state MDS system will be removed.

MDS Data Specifications

It is currently anticipated that Version 1.03 of the MDS data specifications will remain in effect until late April 2000. At that time Version 1.10 will be implemented, replacing Version 1.03. The specific date of the implementation of Version 1.10 will be announced at a later time. Version 1.10 includes important new changes including:

1. Implementation of a new MDS Correction Policy and Correction Request Form that will allow facilities to make automated requests to correct MDS records in the State database,
2. Enhanced record rejection criteria that will elevate most data errors to fatal errors resulting in record rejection, and
3. Revision of record locking and submission timing requirements.

A more comprehensive list of changes and Version 1.10 documentation set is now available for downloading from the HCFA website at:

<http://www.hcfa.gov/medicare/hsqb/mds20/whatsnew.htm>

Be sure to share this information with your MDS software vendor.

Encryption

HCFA is targeting July 2000 for requiring encryption of MDS data submissions. Currently MDS assessment data are sent to the State via a private telephone line that connects directly into the MDS State system. Although this is a relatively secure method, additional protection may be provided by using encryption.

A 128-bit encryption is standard for newer versions of Netscape and Microsoft Internet Explorer, the two major web browsers. Both products are available free off the Internet or by mail for a nominal fee. (Note that Netscape is the browser recommended and supported by HCFA. Netscape software can be downloaded off the Internet at website: <http://home.netscape.com/download/>) There are some system requirements to run these browsers. This includes a 32-bit operation system, i.e., a computer that runs Windows 95, 98, or NT.

HCFA 802 Roster/Sample Matrix Form

The HCFA 802 form and instructions are in the process of being revised. The Draft Final dated 12/99 is available on the HCFA website (same HCFA website mentioned above) and will soon be implemented when formally published in a State Operations Manual transmittal. The Provider Instructions include a crosswalk to MDS items. With the implementation of the new 802 form, the existing crosswalk from the MDS version 2.9 to the 802 becomes obsolete. There is not a federal requirement for automation of the 802 form. A facility may code the 802 form manually.

Confidentiality and MDS Contractual Agreements

MDS data are considered to be a part of the resident's clinical record, and as such, are protected from improper disclosure by facilities under 42 CFR 483.10(e). Facilities are required to keep confidential all information contained in the resident's record and to maintain safeguards against the unauthorized use of resident clinical information, regardless of storage method. By regulation, release of information from the resident's clinical record is permissible only when required:

1. by transfer to another health care institution,
2. by law, (both State and federal)
3. by the resident.

A facility may not release resident identifiable information to the public. Providers, who are part of a chain, may release data to their corporate office or parent company but not to other providers within their chain. The parent company is required to "act" in the same manner as the facility and permitted to use data only to the extent the facility is permitted to do so (as described above).

Resident Identifiable Data

A facility may not release resident identifiable information to the public. Stripping obvious demographic identifiers (name, birth date, HCFA number) from records does not necessarily insure record anonymity. The large number of items that comprise the MDS greatly increases the likelihood for the creation of a subset of semi-identifiers that would render a record identifiable, especially when the aggregates for a particular cell yield fewer than 10 observations. Providers pursuing the release of aggregate data must insure it is not resident identifiable. Providers can contact HCFA for further guidance regarding the release of aggregate data.

Contractual Agreements

The release of data by a facility to another person or entity (e.g., physical therapist, occupational therapist, software vendors) under contract and who has a need to know the MDS information in order to develop plans of care and/or handle MDS data for administrative reasons, such as for transmission to the State repository or to develop quality indicator reports for the facility, requires the agent to "act" in the same manner as the facility. Agents under contract must therefore adhere to requirements of 42 CFR 483.10(e).

In the case where a facility submits MDS data to the State through a contractor or through its corporate office, the contractor or corporate office has the same rights and restrictions as the facility does under the regulations with respect to maintaining resident data, keeping such data confidential, and making disclosures of such data. This means that a contractor may maintain a database but may not use the data in a manner in which the facility itself would be prohibited from using it. Moreover, the fact that there may have been a change of ownership of a facility that has been transferring data through a contractor should not alter the contractor's rights and responsibilities; presumably, the new owner has assumed existing contractual rights and obligations, including those under the contract for submitting MDS information.

All contractual, regardless of their type, agreements involving the MDS data should not violate the requirements of participation in the Medicare and/or Medicaid program or any applicable State laws.

MDS Errors and Correction Policy

BQA technical staff continue to receive calls related to when and how to correct MDS errors and what is a fatal record error versus a non-fatal record error. These topics were covered in detail in the September 7, 1999 BQA memo number DSL-BQA-99-050. Contact Chris Benesh at (608) 266-1718 or Cindy Symons at (608) 266-9675 if you do not have this information and/or you have questions. Nursing home BQA memos can also be accessed on the DHFS website at:

http://www.dhfs.state.wi.us/rl_DSL/NHs/NHpubs.htm

Remember to share these informational memos with staff that encode and transmit MDS data.

RAI - Basic Training

Several one-day basic Resident Assessment Instrument (RAI) training programs will be offered around the state in March 2000. This program is designed for persons who are new to using the RAI and the Minimum Data Set (MDS) and persons who need to update knowledge, skills and abilities in the RAI process. The tentative training dates are listed below:

Madison - March 14 and 15
Eau Claire - March 22 and 23
Fond du Lac - March 28 and 29

Additional information including registration information will be sent to all nursing homes soon.